

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to

Morris Funeral Home

Name of Deceased

James V. Macura

Age

56

years months days

Place of death

Southborough Ma

Date of death

December 30 2009

Metastatic

Cause of death

Esopharyngeal Cancer

Interment at

Rural Crematory

Date permit issued

Jan 4, 2010

Certified by

John R. Clark M.D.

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to

Town Clerk

(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased

James V. Macura

If a U. S. War Veteran, specify what war, organization, etc.

— — —

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at (Name of cemetery or crematory) (City or town)

on JAN 07 2010

Certified by John H. Cobell

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 02-10.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to John P. BoweName of Deceased Ann L. StrateAge 68 years — months — daysPlace of death Southborough, Ma.Date of death Feb 2, 2010Cause of death Pancreatic CancerInterment at Rural CrematoryDate permit issued Feb 4, 2010Certified by Nadine Jackson M.D.

No. 02-10.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough, Mass.Name of deceased Ann L. Strate

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at
FEB 05 2010 (Name of cemetery or crematory)

on (City or town)

Certified by John W. Coble
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 03-10...

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*

Issued to Morris Funeral Home

Name of Deceased Normand M. Bergeron

Age 87 years - months - days

Place of death Southboro, MA

Date of death Feb 27, 2010

Cause of death Respiratory Failure

Interment at St. John's Cemetery

Date permit issued March 1, 2010

Certified by Paul S. Wright M.D.

No. 03-10....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*

to Town Clerk
(Office issuing permit)

City or Town of Southborough, Mass.

Name of deceased Normand M. Bergeron

If a U. S. War Veteran, specify what war, organization, etc.

WW II

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St. John's Cemetery, Hopkinton
(Name of cemetery or crematory) (City or town)

on March 2, 2010

Certified by Paul S. Wright
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 04-10

No. 04-10

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Brasco & Sons MemorialName of Deceased Harold BernsteinAge 59 years - months - daysPlace of death 14 Moulton Rd.Date of death March 13, 2010Cause of death Metastatic GastricInterment at Mt. Feake CemeteryDate permit issued March 17, 2010Certified by Jeffrey Meyerhardt M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Harold Bernstein

If a U. S. War Veteran, specify what war, organization, etc.

— — —**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mount Feake Cemetery Waltham, MA
(Name of cemetery or crematory) (City or town)on March 17, 2010Certified by Mary Cross
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 05-10

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*

Issued to Morris Funeral Home

Name of Deceased Linda June Spiller

Age 84 years months days

Place of death 49 Boston Rd Southboro

Date of death March 24, 2010

Cause of death Coronary Artery Dis.

Interment at Rural Crematory

Date permit issued March 25, 2010

Certified by Charles S. Keevil Jr. M.D.

No. 05-10

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Linda June Spiller

If a U. S. War Veteran, specify what war, organization, etc.

— — —**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Crematory
at 180 Grove Street (City or town)
on March 26, 2010 Worcester, MA 01605

Certified by John T. Cobell

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 06-10.....

No. 06-10.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased James B. DenmanAge 89 years months daysPlace of death 42 Flagg Rd. SouthboroDate of death April 19, 2010Cause of death Respiratory FailureInterment at Rural CemeteryDate permit issued April 12, 2010Certified by Matthias Nurnberger M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough, Mass.Name of deceased James B. Denman

If a U. S. War Veteran, specify what war, organization, etc.

W.W. II**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, MA
(Name of cemetery or crematory)
(City or town)on April 24, 2010Certified by D. J. H. / M. N. / M.D.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 07-10.....No. 07-10.....**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to
*Morris Funeral Home*Name of Deceased
Katherine Wright Breitfelder

Age 53 years months days

Place of death
*Southboro, MA*Date of death
*May 18, 2010*Cause of death
Mekastake Colon Cancer
Interment at
*Rural Cemetery*Date permit issued
*May 20, 2010*Certified by
*Swamy Viswanathan M.D.***BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to
Trix Clark
(Office issuing permit)City or Town of
Southborough Mass.Name of deceased
Katherine Wright Breitfelder

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at
Rural Cemetery
(Name of cemetery or crematory)
Southborough, MA
(City or town)on
May 22, 2010
(Date)Certified by
Dadhi Bhatia, D.C.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 08-10.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*

Issued to

Morris Funeral Home

Name of Deceased

Louis Julio Bartolini

Age

84

years

months

days

Place of death

8 View Hill, Southboro
MA

Date of death

June 8, 2010

Cause of death

ALS

Interment at

Rural Cemetery

Date permit issued

June 10, 2010

Certified by

James Howe M.D.

No. 08-10.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough, Mass.

Name of deceased

Louis Julio Bartolini

If a U. S. War Veteran, specify what war, organization, etc.

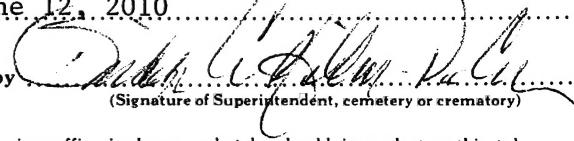
WW II

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, MA.....
(Name of cemetery or crematory) (City or town)on June 12, 2010

Certified by


(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 09-10....

No. 09-10....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Concord Funeral HomeName of Deceased Phillip E. RitchieAge 57 years - months - daysPlace of death 50 Turnpike Rd #22
Southborough MADate of death June 10, 2010Cause of death Atherosclerotic Cardio-
VascularInterment at Rural CrematoryDate permit issued June 14, 2010Certified by Richard Evans M.D.
Med Examiner**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Phillip E. Ritchie

If a U. S. War Veteran, specify what war, organization, etc.

No**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at
Rural Crematory
at
(Name of cemetery or crematory) 100 Grove Street City or town
on JUN 17 2010 Worcester, MA 01605.....Certified by John H. Cable.....

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 10-10.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*

Issued to Douglas Bowdoin Antes
1600 Main St Hyannis MA
 Name of Deceased Steven Bowdoin Antes

Age 49 years - months - days

Place of death Southborough MA

Date of death June 14, 2010

Cause of death Blunt trauma to head
Torso & extremities

Interment at St Francis Xavier Cem.
Hyannis MA

Date permit issued June 21, 2010

Certified by Kimberly Springer M.D.

No. 10-10.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*

to Town Clerk
 (Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Steven Bowdoin Antes

If a U. S. War Veteran, specify what war, organization, etc.

No

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

St. Francis Xavier Cem., Centerville, MA
 at

(Name of cemetery or crematory) (City or town)

on June 21, 2010

Certified by Frank A. McF

(Signature of Superintendent cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 11-10**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Kernel Wickers & GrouseName of Deceased John Victor GregoireAge 72 years months daysPlace of death Southborough MADate of death July 17, 2010Cause of death Metastatic CancerInterment at Duxbury CrematoryDate permit issued July 23, 2010Certified by Robert A. Saucier M.D.No. 11-10**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased John Victor Gregoire

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Duxbury Crematory, Duxbury, Ma
(Name of cemetery or crematory) (City or town)on July 23, 2010Certified by R. A. Saucier

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

R-309
The Commonwealth of Massachusetts



DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

No. 12-10

OFFICIAL BURIAL (OR REMOVAL) PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended.)

(This permit can be signed only by the agent of the Board of Health or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death (printed or typed in durable black ink.)

Southborough July 26, 2010

(City or town)

(Date)

A satisfactory certificate of death having been filed, permission is hereby given to

Dorothy A. Hooke, 40 Main St, Southborough MA

(Name)

(Address)

for the removal from and the interment

(To be filled out in case of removal)

at Royal Crematory Cemetery in Worcester of the

body of Dorothy A. Hooke who died July 24 2010

(Give full name of deceased)

(Month)

(Day)

(Year)

age 68 years, months days.

Cause of death Cerebral bleed

If a U. S. War Veteran, specify what war, organization, etc. —

Residence at time of death 2 Walker St. Southborough MA

Pullen

(Signature of Agent of Board of Health, or in towns where there is no
Board of Health, of Town Clerk)

No. 12-10

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Dorothy A. Hooke

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the baby accompanying this permit was
disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory)
(City, or town)

on July 30, 2010 in Sec. L Grv#29B

Certified by Dorothy A. Hooke
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 12-10**BURIAL (OR REMOVAL) PERMIT**

Stub to be retained by officer issuing permit

Issued to Mary MorrisName of Deceased Dorothy KochAge 68 years months daysPlace of death 2 Walker St.Date of death July 24, 2010Cause of death Cerebral BleedInterment at Rural Crematory, Worcester, MADate permit issued July 26, 2010Certified by Donald Sadaopan M.D.No. 12-10**BURIAL (OR REMOVAL) PERMIT**

This coupon to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Dorothy A. Koch

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory) 180 Grove Street
(City or town) Worcester, MA 01605on JUL 27 2010
John A. CobleCertified by
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 13-10**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Regina Branson SlatteryName of Deceased Mauricee JaeeoneAge 74 years months daysPlace of death SouthboroughDate of death Aug. 16, 2010Cause of death Brown MetastasisInterment at Natl Cem Bourne, MADate permit issued Aug. 30, 2010Certified by Humbert Rossi M.D.No. 13-10**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Mauricee Jaeeone

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT(To be filled in by cemetery or crematory official)
INTERRED

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at MASSACHUSETTS NATIONAL CEMETERY, BOURNE, MA (City or town)on 31 Aug 2010Certified by Humbert Rossi
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 14-10

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Morris Funeral Home

Name of Deceased : Algoe Vu

Age..... 63 years..... months..... days

Place of death: 39 Constitution, South Kensington

Date of death August 29, 2010

Cause of death: Metastatic Anal Cancer

Interment at Rural Cemetery

Date permit issued August 31, 2010

Certified by Peter Eitzinger M.D.

No. 14-10

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit) 1

City or Town of Southbridge Mass.

Name of deceased Ngoc Vu

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery..... Southborough, MA.....
(Name of cemetery or crematory) (City or town)

on August 31, 2010 Seq. L, Gry#38

[Signature]

Certified by (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

15-10

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to William BadmanNewton, MAName of Deceased Paul Herbert DashAge 68 years - months - daysPlace of death 31 Overlook Dr.Date of death Nov. 21, 2010Cause of death Metastatic PancreaticCancer gen.Interment at Newton CrematoryDate permit issued Nov. 24, 2010Certified by Kala See Thavavannavil M.D.No. 15-10**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of SOUTH BOROUGH, Mass.Name of deceased Paul Herbert Dash

If a U. S. War Veteran, specify what war, organization, etc.

 ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Newton Crematory Newton, MA
(Name of cemetery or crematory) (City or town)on November 26, 2010Certified by Kala See Thavavannavil
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 01-11.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*

Issued to Morris Funeral Home

Name of Deceased Dorothy Pendleton

Age 101 years — months — days

Place of death Southboro 9 Winter St

Date of death April 9, 2011

Cause of death Alzheimer's Dis

Interment at Rural Cemetery

Date permit issued April 12, 2011

Certified by Shan-Hwa Lee M.D.

No. 01-11.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Dorothy N. Pendleton

If a U. S. War Veteran, specify what war, organization, etc.

— — —

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or town)

on April 15, 2011

Certified by *D. H. Pendleton*
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 02-11.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Ralph Emerson HollisAge 94 years - months - daysPlace of death 80 Mt. Vickerly Rd.Date of death April 19, 2011Cause of death Gangrene right footInterment at Rural CemeteryDate permit issued April 20, 2011Certified by David Levitin M.D.

No. 02-11.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough, Mass.Name of deceased Ralph Emerson Hollis Sr.

If a U. S. War Veteran, specify what war, organization, etc.

WW II**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, MA
(Name of cemetery or crematory) (City or town)on April 22, 2011Certified by D. Levitin
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

03-11
No.

No. 03-11....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Edna E WardAge 76 years months daysPlace of death SouthboroughDate of death April 28, 2011Cause of death End Stage COPDInterment at Rural CemeteryDate permit issued May 2, 2011Certified by Melissa Males M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Edna E Ward

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or town)on May 2, 2011Certified by D. G. Males
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 04-11.....

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Miles Funeral Home
100 Worcester Rd, Sterling MA 01564

Name of Deceased Rev. Thomas B. Garlick

Age 61 years months days

Place of death Southborough

Date of death May 22, 2011

Atherosclerotic Cardiovascular

Cause of death Disease

Interment at New Cem., Ashburnham,
MA

Date permit issued May 25, 2011

Certified by Richard Evans M.D.

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of deceased Alice A. Bell

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Crematory

at 180 Grove Street (Name of cemetery or crematory)

JUN 01 2011 (City or town)
on Cremation

Certified by John T. Cobell
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 06-11.....**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Statter Funeral HomeName of Deceased Peter John NicholasAge 76 — months — daysPlace of death SouthboroughDate of death June 24, 2011Cause of death Metastatic Prostate
CancerInterment at Beveral CrematoryDate permit issued June 27, 2011Certified by Lalita Motta M.D.No. 06-11.....**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Peter John Nicholas

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms.

at
on
on JUN 29 2011 (Name of cemetery or crematory)
Rural Crematory
180 Grove Street
Worcester, MA 01605Certified by John H. Cobble
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 07-11

No. 08-11

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Mrs. S. General HokeName of Deceased Seraphela KeyonthawishAge 74 years - months - daysPlace of death SouthboroughDate of death Aug. 13, 2011Cause of death Alzheimer's DementiaInterment at St. Mary's Cem. Holliston MADate permit issued Aug. 16, 2011Certified by John Leeder M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of SOUTH BOROUGH Mass.Name of deceased XIAOYUN JIANG

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Newton Crematory Newton, MA
(Name of cemetery or crematory) (City or town)on August 29, 2011Certified by John Leeder

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 09-11

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased William L Stoddard Jr.Age 75 years months daysPlace of death Southborough MaDate of death Sept 23, 2011Cause of death Metastatic Colon CancerInterment at Rural Cem. SouthboroDate permit issued Sept 26, 2011Certified by Kala Seetharaman M.D.

No. 09-11

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased William L Stoddard

If a U. S. War Veteran, specify what war, organization, etc.

Korean**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or town)on September 26, 2011Certified by John A. Kelly Jr.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 09-1P

No. 09-1P

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Metrowest FuneralName of Deceased Steven MessomAge 51 years - months - daysPlace of death SouthboroughDate of death Sept 28 2011Cause of death PendingInterment at St Michael Crematory
Boston, MADate permit issued October 7 2011Certified by Richard Evans M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Steven Messom

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms**ST. MICHAEL CREMATORY**at BOSTON, MA 02131 (City or town)on 10/13/11Certified by Mark Cheng
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 59-13
10-11No. 29-13
10-11**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Eaton Funeral HomeName of Deceased Ruth A. VlastAge 77 years - months 1 daysPlace of death Southborough MaDate of death October 9, 2011Cause of death Metastatic Pancreatic
CancerInterment at St. Mary's Cem.Date permit issued October 12, 2011Certified by Revati Rao M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Ruth A. Vlast

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at St. Mary Neasham (Name of cemetery or crematory) (City or town)on 10-12-11Certified by Joseph Kil
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 11-11.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Bernard L. PhillipsAge 89 years 0 months 0 daysPlace of death 9 Walker StDate of death Nov 4, 2011Cause of death Respiratory FailureInterment at Rural Crematory/WorcesterDate permit issued Nov 7, 2011Certified by Michele Gark M.D.

No. 11-11.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Bernard L. Phillips

If a U. S. War Veteran, specify what war, organization, etc.

WW II Army**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with the following:

Rural Crematory
180 Grove Street
 at
(Name of cemetery or crematory) (City or town)

on NOV 09 2011 Cremation
 Certified by John W. Cobell

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 12-11.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southboro Mass.Name of deceased Barbara Duvant

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms.

Rural Crematory
at Rural Cemetery South 80 Grove Street

(Name of cemetery or crematory) Worcester, MA 01605

on DEC 14 2011 - Buried on Dec 17, 2011Certified by John H. Cobell

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 12-11.....

No. 12-11.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Barbara DumontAge 97 years - months - daysPlace of death Southborough MaDate of death December 9, 2011Cause of death Natural causes (old age)Interment at Rural CrematoryDate permit issued December 12, 2011Certified by James Howe M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Barbara Dumont

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

Rural Crematory
 at
 (Name of cemetery or crematory)
 180 Grove Street
 Worcester, MA 01605
 on DEC 14 2011

Certified by John H. Cobell
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 13-11.....

No. 13-11.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Ethel ArmstrongAge 94 years 0 months 0 daysPlace of death 15 Ha sq Rd SouthboroDate of death Dec 19 2011Cause of death Sudden ShockInterment at Pewal Cemetery SouthboroDate permit issued Dec 20 2011Certified by Matthew Bean M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Ethel Armstrong

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Pewal Cemetery Southborough MA
(Name of cemetery or crematory) (City or town) JAon Dec 21 2011 Full body burial lot N
Grave 2Certified by St. J. Murphy
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 14-11No. 14-11**BURIAL (OR REMOVAL) PERMIT***Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased MERCEDES A. EVANSAge 71 years — months — daysPlace of death 107 Middle Neck Lane SouthboroughDate of death December 27 2011Cause of death Cardiac ArrestInterment at RURAL CemeteryDate permit issued December 29 2011Certified by AMR HASSAN M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased MERCEDES A. EVANS

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, MA
(Name of cemetery or crematory) (City or town)on Dec. 30, 2011 - Sec. L #231. Lawn CryptCertified by AMR HASSAN M.D.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 01-12.....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris Funeral HomeName of Deceased Winifred Marie ScottAge 68 years 0 months 0 daysPlace of death SouthboroughDate of death Jan 4, 2012Cause of death Re. Syp. FailureInterment at Cathedral Cemetery
Southborough, MADate permit issued Jan 4, 2012Certified by Kimberly Buckner M.D.

No. 01-12.....

BURIAL (OR REMOVAL) PERMIT*This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Winifred M. Scott

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Cathedral Cemetery
(Name of cemetery or crematory)
on 1-9-12 (City or town)Certified by Walters

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

No. 02-12....

No. 02-12....

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Moss Funeral HomeName of Deceased David M. SmithAge 56 years — months — daysPlace of death Southborough, MADate of death January 7, 2012Cause of death Other Characteristic
cardiovascular diseaseInterment at Burrill C.R.O. CemeteryDate permit issued January 11, 2012Certified by William E. Clark M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough, Mass.Name of deceased David M. Smith

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was
disposed of in accordance with instructionsRural Crematory
180 Grove Street
Worcester, MA 01605at
(Name of cemetery or crematory)
on JAN 12 2012Certified by
John H. Coble
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

The Commonwealth of Massachusetts

No. 03-12

OFFICIAL DISPOSITION, REMOVAL OR TRANSPORTATION PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Tar. Ed., as amended)

This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in permanent black ink.

City/Town SOUTHBOROUGH, MA Date JAN 17 2012

A satisfactory death certificate having been filed for

ERIC C GREEN.....
Full name of decedent

who died on JANUARY 12, 2012 US War Veteran —
date of death

born on MAY 27, 1999, who resided at
date of birth

32 CONSTITUTION DRIVE

SOUTHBOROUGH, MA 01772

and who died of PENDING give immediate cause

Permission is hereby given for (check all appropriate boxes):

Removal from:
name and address of original disposition

Disposition at: RURAL CEMETERY, SOUTHBOROUGH, MA
name and address of cemetery or crematory

Transportation to:
name and address of immediate destination of remains

Permission is hereby given to: RICE FUNERAL HOME
300 PARK AVENUE
WORCESTER MA 01605
name of facility
address of facility

Signature of Board of Health Agent, or, in towns where there is no Board of Health, of Town Clerk

R309, 100M-6/87-815791

No. 03-12

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to RICE FUNERAL HOME
Worcester, MA

Name of Deceased ERIC C GREEN

Age 12 years — months — days

Place of death SOUTHBOROUGH, MA

Date of death JANUARY 12, 2012

Cause of death PENDING

Interment at RURAL CEMETERY

Date permit issued JANUARY 17, 2012

Certified by REBECCA M. ROBINSON M.D.

No. 04-12

No. 04-12

BURIAL (OR REMOVAL) PERMIT*Stub to be retained by officer issuing permit*Issued to Morris FuneralName of Deceased Victor J. GravesAge 15 years 0 months 0 daysPlace of death Southboro - 12 Gen Henry DrDate of death Feb 23 2012Cause of death Lung CancerInterment at Burnt CemeteryDate permit issued Feb 24 2012Certified by Timothy Reidy M.D.**BURIAL (OR REMOVAL) PERMIT***This coupon to be returned immediately, properly endorsed*to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of deceased Victor J. Graves

If a U. S. War Veteran, specify what war, organization, etc.

ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at
Rural Crematory
180 Grove Street
(Name of cemetery or crematory)
on FEB 26 2012 Worcester, MA 01605
(City or town)Certified by J. Tim Reidy

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Elizabeth Deppa

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory) (City, Town)

on APR 16 2012 180 Grove Street
Worcester, MA 01605

Final Disposition

Certified by John H Cobell
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 05-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent

Elizabeth DePena

Sex ♂ Date of Death April 11, 2012

Place of Death Southborough

Date of Birth Dec. 2, 1934

Immediate Cause Hepato Cellular Carcinoma

Certifier Kalende Manta M.D./DO

Permit Issued To Tracey Morris

Disposition At Rural Crematory

Name of Facility Morris Funeral Home

Date Permit Issued April 13, 2012

The Commonwealth of Massachusetts

No. 05-12

OFFICIAL DISPOSITION, REMOVAL OR TRANSPORTATION PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended)

This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in permanent black ink.

City/Town Southborough Date April 13, 2012

A satisfactory death certificate having been filed for Elizabeth DePena

Full name of decedent

who died on April 11, 2012 US War Veteran —

born on Dec. 2 1934, who resided at

date of death
date of birth20 Clifford St
Southborough, MA 01772

and who died of Hepato - cellular Carcinoma

give immediate cause

Permission is hereby given for (check all appropriate boxes):

 Removal from:

name and address of original disposition

 Disposition at: Rural Crematory

name and address of cemetery or crematory

 Transportation to:

name and address of immediate destination of remains

Permission is hereby given to:

Horses Funeral Home
40 Main St. Southborough MA

name of facility

address of facility

No. 05-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk

(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Elizabeth DePena

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
cremated remains
disposed of in accordance with its termsat Rural Cemetery Southborough, MA
(Name of cemetery or crematory)
(City/Town)

on April 19, 2012

Final Disposition Sec. 4, Lot 4, Grv#2A

Certified by [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

Signature of Board of Health Agent, or, in towns where there is no Board of Health, of Town Clerk

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Mary L. Stadig

Sex F Date of Death Feb 27. 2012

Place of Death 1 John Matthews Rd

Date of Birth Sept 17 1921

Immediate Cause Failure to thrive

Certifier D. John K. Karian M.D./DO

Permit Issued To Nancy Morris
Morris Funeral Home

Disposition At Wildwood Cem. Chestland, MA

Name of Facility Morris Funeral Home

Date Permit Issued February 28, 2012

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Mary L. Stadig

If a U.S. War Veteran, specify what war, organization, etc.

— — —
=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Wildwood Ashland
(Name of cemetery or crematory) (City/Town)

on MARCH 1, 2012

Final Disposition WILDWOOD CEMETERY

Certified by Peter Nader
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

The Commonwealth of Massachusetts

No. 06-12

OFFICIAL DISPOSITION, REMOVAL OR TRANSPORTATION PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended)

This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in permanent black ink.

City/Town Southborough Date April 18, 2013

A satisfactory death certificate having been filed for

Ernest F. Silvestri

(Full name of decedent)

who died on April 16, 2013 US War Veteran WW II

born on July 2, 1923, who resided at

162 Woodland Rd

Southborough MA

and who died of Heart Failure give immediate cause

Permission is hereby given for (check all appropriate boxes):

Removal from: _____ name and address of original disposition

Disposition at: Beverly Crematory name and address of cemetery or crematory

Transportation to: _____ name and address of intended destination of remains

Permission is hereby given to:

Morris Funeral Home name of facility

40 Main St. Southborough MA address of facility

J. Bay

Signature of Board of Health Agent, or, in towns where there is no Board of Health, of Town Clerk)

No. 06-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk (Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Ernest F. Silvestri

If a U.S. War Veteran, specify what war, organization, etc.

WW II

ENDORSEMENT

(To be filled in by cemetery or crematory official)

cremated remains

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA (Name of cemetery or crematory)

(City/Town)

on April 16, 2013

Final Disposition Sec. M, GIV #65A

Certified by Brian J. Miller Jr. (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 06-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

Stub to be retained by officer issuing permit

Name of Decedent Ernest SilvestriSex M Date of Death April 16, 2012Place of Death SouthboroughDate of Birth July 2, 1927Immediate Cause Heart FailureCertifier David Carlson M.D./DOPermit Issued To Maney MorrisDisposition At Reeves CrematoryName of Facility Morris Funeral HomeDate Permit Issued April 18, 2012No. 06-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

This section to be returned immediately to the issuing City/Town, properly endorsed

to Terry Clark
(Office issuing permit)City/Town of Southborough Mass.Name of Decedent Ernest L Silvestri

If a U.S. War Veteran, specify what war, organization, etc.

WW II**ENDORSEMENT**

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory) (City/Town)on APR 27 2012 180 Grove Street
Worcester, MA 01605Final Disposition John H. CarlsonCertified by John H. Carlson
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 06-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Esther LesieerSex F Date of Death Feb 28, 2012Place of Death SouthboroughDate of Birth April 21, 1935Immediate Cause Liver CirrhosisCertifier L. Meag. He M.D./DOPermit Issued To Alce SlatteryDisposition At Immaculate Conc. CemName of Facility Slattery Funeral HomeDate Permit Issued March 5, 2012No. 06-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)City/Town of Southborough Mass.Name of Decedent Esther Lesieer

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at IC Southborough
(Name of cemetery or crematory) (City/Town)on 3-5-12Final Disposition Sec 3Certified by O
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Harvey D. Bigelow Sr.

Sex M Date of Death March 3, 2012

Place of Death 30 A Bigelow Rd.

Date of Birth October 1, 1931

Immediate Cause Intestinal Lung Disease

Certifier Shuk-Hou Lee M.D./DO

Permit Issued To Nancy Morris
Morris Funeral Home

Disposition At Rural Cemetery

Name of Facility Morris Funeral Home

Date Permit Issued March 6, 2012

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk

(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Harvey D. Bigelow Sr.

If a U.S. War Veteran, specify what war, organization, etc.

=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)

on March 6, 2012

Final Disposition Sec. A, Lot 29, Grv#5

Certified by G. J. Morris
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 08-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

Stub to be retained by officer issuing permit

Name of Decedent Herman V OlsonSex M Date of Death March 8, 2012Place of Death Col Charles CtDate of Birth Feb 4, 1931Immediate Cause Met Oropharynx CancerCertifier William V Walsh M.D./DOPermit Issued To Nancy MorrisDisposition At Rural CrematoryName of Facility Morris Funeral HomeDate Permit Issued March 8, 2012No. 08-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk

(Office issuing permit)

City/Town of Southborough Mass.Name of Decedent Sherman V Olson

If a U.S. War Veteran, specify what war, organization, etc.

=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory)on MAR 14 2012 180 Grove Street
Worcester, MA 01605Final Disposition in urnCertified by Jean H Cobell
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

The Commonwealth of Massachusetts

No. OS-12

OFFICIAL DISPOSITION, REMOVAL OR TRANSPORTATION PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended)

This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in permanent black ink.

City/Town Southborough Date March 8, 2012

A satisfactory death certificate having been filed for
Sherman V Olson,

Full name of decedent
who died on March 8, 2012 US War Veteran -- --

date of death
born on Feb. 4, 1931, who resided at

Col Charles CT
Southborough Ma 01772

and who died of Metastatic Oropharynx Cancer give immediate cause

Permission is hereby given for (check all appropriate boxes):

Removal from: _____
name and address of original disposition

Disposition at: Rural Crematory
name and address of cemetery or crematory

Transportation to: _____
name and address of immediate destination of remains

Permission is hereby given to:
Morris Funeral Home
name of facility
40 Main St Southboro MA
address of facility

No. OS-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Sherman V Olson

If a U.S. War Veteran, specify what war, organization, etc.

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=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

Cremated Remains

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough MA
(Name of cemetery or crematory)

on April 1, 2019

Final Disposition See M, Gov. 5/14

Certified by B. J. Olson Jr.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Rose B WashingtonSex F Date of Death May 27, 2012Place of Death Southborough, MADate of Birth Feb. 24, 1943Immediate Cause Chronic EthanolismCertifier Richard Evans M.D./DO
William FayPermit Issued To Callahan & Fay Bros
Worcester, MADisposition At St. John's CemeteryName of Facility Callahan & Fay Bros.Date Permit Issued May 30, 2012

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

Stub to be retained by officer issuing permit

Name of Decedent Jean FredellaSex F Date of Death June 12, 2012Place of Death Southborough MADate of Birth Aug 23, 1934Immediate Cause Carcinoma of the BladderCertifier Kala Seetharaman M.D. DOPermit Issued To Nancy MorrisDisposition At Rural Cemetery ShbroName of Facility Morris Funeral HomeDate Permit Issued June 13, 2012**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)City/Town of Southborough Mass.Name of Decedent Jean A. Fredella

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)on June 16, 2012Final Disposition Sec. I, Gry #247Certified by D. Morris
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Nancy BassettSex F Date of Death 6/20/2012Place of Death SouthboroughDate of Birth June 16, 1952Immediate Cause Lung CancerCertifier M.D./DO
=====Permit Issued To Ronas SidasDisposition At Hopscall Village Cem.Name of Facility Burns Funeral HomeDate Permit Issued June 22, 2012

No. 12-12.....

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent *Workezebo Hailemecot*Sex *F* Date of Death *July 16, 2012*Place of Death *Southborough*Date of Birth *Sept. 24, 1938*Immediate Cause *Met Pancreatic Cancer*Certifier *Shahnaz Montague* M.D./DO*Keete Cheshire*Permit Issued To *Cheshire Funeral Home*Disposition At *Rural Cemetery*Name of Facility *Cheshire Funeral Home*Date Permit Issued *July 19, 2012*

No. 12-12.....

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately to the issuing City/Town, properly endorsed*to *Town Clerk*
(Office issuing permit)City/Town of *Southborough* Mass.Name of Decedent *Workezebo Hailemecot*

If a U.S. War Veteran, specify what war, organization, etc.

*-----
=====***ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at *Rural Cemetery* Southborough, MA
(Name of cemetery or crematory) (City/Town)on *July 21, 2012*Final Disposition *Sec. I., Gry #251*Certified by *S. Shahnaz Montague*
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 13-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Katherine Lee Catz

Sex F Date of Death July 27, 2012

Place of Death Southborough

Date of Birth June 22, 1959

Immediate Cause Carcinoid Tumors

Certifier Matthew Kulke M.D./DO

Permit Issued To Joha P. Rose

Disposition At Rural Cemetery

Name of Facility Joha P. Rose Funeral Home

Date Permit Issued July 30, 2012

No. 13-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Teresa Clark
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Katherine Catz

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)

on July 31, 2012

Final Disposition Sec. I., Grv #244

Certified by Beth A. Miller
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 14-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent George Edward BeckSex M Date of Death September 19, 2012Place of Death 19 Walnut Dr. SouthboroughDate of Birth June 30, 1936Immediate Cause End Stage COPDCertifier Justin Dorfman M.D./DOPermit Issued To Alan P. SlatteryDisposition At Rural Crematory, WorcesterName of Facility Slattery Funeral HomeDate Permit Issued September 19, 2012No. 14-12**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately to the issuing City/Town, properly endorsed*to TOWN CLERK
(Office issuing permit)City/Town of Southborough MassName of Decedent George Edward Beck

If a U.S. War Veteran, specify what war, organization, etc.

=====**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory) 180 Grove Street
(City/Town)on SEP 21 2012 WORCESTER, MASSACHUSETTS

Final Disposition

Certified by John H Cobell
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 15-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Pauline A True

Sex F Date of Death Oct 18, 2012

Place of Death Southborough

Date of Birth May 21, 1938

Immediate Cause Uterine Cancer

Certifier Frank Coco M.D./DO

Permit Issued To Nancy Morris

Disposition At Mt Hope Cem. Bangor, ME

Name of Facility Morris Funeral Home

Date Permit Issued Oct 22, 2012

No. 15-12

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Pauline True

If a U.S. War Veteran, specify what war, organization, etc.

=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Mt. Hope Cemetery, Bangor, ME
(Name of cemetery or crematory) (City/Town)

on October 23, 2012

Final Disposition Burial

Certified by Edward McCloskey
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 01-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Carolyn Urban

Sex F Date of Death Feb. 23, 2013

Place of Death 14 Leonard Dr. Southboro

Date of Birth September 3, 1944

Immediate Cause Cardiac Arrest

Certifier James Howe M.D./DO

Permit Issued To Nancy Morris
Morris Funeral Home

Disposition At Rural Crematory

Name of Facility Morris Funeral Home

Date Permit Issued February 25, 2013

No. 01-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Carolyn Urban

If a U.S. War Veteran, specify what war, organization, etc.

=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Crematory
(Name of cemetery or crematory)
on Feb. 28, 2013 180 Grove Street
Worcester, MA 01605

Final Disposition John H. Cobell

Certified by (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

The Commonwealth of MassachusettsNo. 01-13**OFFICIAL DISPOSITION, REMOVAL OR TRANSPORTATION PERMIT**

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended)

This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER THE FILING and acceptance of a satisfactory certificate of death, printed or typed in permanent black ink.

City/Town Southborough Date Feb 25. 2013

A satisfactory death certificate having been filed for
Carolyn Urban,
Full name of decedent

who died on February 23. 2013 US War Veteran — — —
date of death

born on September 3. 1944, who resided at
date of birth

14 Leonard Dr
Southborough, MA 01772

and who died of Cardiac arrest give immediate cause

Permission is hereby given for (check all appropriate boxes):

Removal from: _____
name and address of original disposition

Disposition at: Rural Crematory
name and address of cemetery or crematory

Transportation to: _____
name and address of immediate destination of remains

Permission is hereby given to:

Morris Funeral Home
40 Main St Southborough MA
name of facility
address of facility
Stacey

Signature of Board of Health Agent, or, in towns where there is no Board of Health, of Town Clerk

No. 01-13**DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT**

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Carolyn Urban

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)

on March 11, 2013

Final Disposition Sec. 5, Lot 14A, Gry 1A

Certified by S. Collier - 10
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 02-13.....

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Edward O Stettner

Sex M Date of Death March 10, 2013

Place of Death Southborough-67 Carriage Hill Dr

Date of Birth Feb 18, 1940

Immediate Cause Metastatic Brain Cancer

Certifier Timothy O'Connor M.D./DO

Permit Issued To George Lofsker

Disposition At Newton Crematory

Name of Facility George Lofsker & Sons

Date Permit Issued March 12, 2013

No. 02-13.....

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Edward O Stettner

If a U.S. War Veteran, specify what war, organization, etc.

=====

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ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Newton Crematory, Newton
(Name of cemetery or crematory) (City/Town)

on 12 March 2013

Final Disposition

Certified by Maylin Sneed
(Signature of superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 03-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

Stub to be retained by officer issuing permit

Name of Decedent Margaret RossiSex Date of Death April 22, 2013Place of Death SouthboroughDate of Birth March 18, 1921Immediate Cause Cardiorespiratory ArrestCertifier Edel Sadegian M.D./DOPermit Issued To Morris Funeral HomeDisposition At Beverly CemeteryName of Facility Morris Funeral HomeDate Permit Issued April 22, 2013No. 03-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

This section to be returned immediately to the issuing City/Town, properly endorsed

to Beverly Cemetery

(Office issuing permit)

City/Town of Southborough Mass.Name of Decedent Margaret Rossi

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)on April 23, 2013Final Disposition Sec. 13 East, Lot. 22, Grv #4Certified by Beverly Cemetery
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Alice M. Foley

Sex F Date of Death May 23, 2013

Place of Death Southborough

Date of Birth May 5, 1926

Immediate Cause Compulsive Heart Failure

Certifier Matthew Bear M.D./DO

Permit Issued To Nancy Morris

Disposition At Rural Cem. Southborough

Name of Facility Morris Funeral Home

Date Permit Issued May 28, 2013

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Alice M. Foley

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)

on May 28, 2013

Final Disposition Sec. C-West. Lot 63W, Grv #2

Certified by D. J. Foley - D.A.
Signature of Superintendent, cemetery or crematory

If there is no officer in charge, funeral director must sign and return this stub.

No. 0513

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent George C Chryssis

Sex M Date of Death May 31, 2013

Place of Death 3 Carriage Hill
Southborough

Date of Birth May 21, 1947

Immediate Cause Hanging

Certifier Richard Evans M.D./DO

Permit Issued To Edward J Doherty

Disposition At The Gardens of Gethsemane
Boston

Name of Facility George J Doherty & Sons

Date Permit Issued June 4, 2013

No. 0513

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk

(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent George C Chryssis

If a U.S. War Veteran, specify what war, organization, etc.

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ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at The Gardens at Gethsemane
(Name of cemetery or crematory) (City/Town)

on June 5, 2013

Final Disposition Burial Mt of Olives 93

Certified by James A Davis
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. OC-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Ariel Medina

Sex M Date of Death June 11, 2013

Place of Death Southborough, MA

Date of Birth April 14, 1990

Immediate Cause Gestic Transection

Certifier Richard Evans S. M.D./DO

~~John McCarthy~~

Permit Issued To McCarthy Funeral Home

Disposition At Newton Crematory

Name of Facility McCarthy Fun. Home

Date Permit Issued June 13, 2013

No. OC-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Officer issuing permit)

City/Town of Southborough, Mass.

Name of Decedent Ariel Medina

If a U.S. War Veteran, specify what war, organization, etc.

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ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Newton Crematory, Newton
(Name of cemetery or crematory) (City/Town)

on 17 June 2013

Final Disposition

Certified by Marylin Bias
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of
Decedent Albert C. AlbenSex M Date of Death Sept 7, 2013Place of
Death 9 Parkerville Rd
SouthboroughDate of
Birth Jan 5, 1932Immediate
Cause Malignant MelanomaCertifier Paul D'Amato, S.I.O. M.D./DONancy MorrisPermit
Issued To Farrell Funeral HomeDisposition
At Springfield Crem.Name of
Facility Farrell Funeral Home
Holyoke MADate Permit
Issued September 10, 2013

No. 08-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
Decedent Francine R. Smith

Sex F Date of Death Sept 10, 2013

Place of
Death 10 Wentworth Dr

Date of
Birth April 21, 1958

Immediate
Cause Breast Cancer

Certifier Eric Winer M.D./DO

Permit
Issued To David Breznik

Disposition
At Beit Olam Cem.
Wayland MA

Name of
Facility Breznik-Bodman
Newton MA

Date Permit
Issued September 11, 2013

No. 08-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk
(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Francine R. Smith

If a U.S. War Veteran, specify what war, organization, etc.

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ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Beit Olam Cem. Wayland
(Name of cemetery or crematory) (City/Town)

on September 12, 2013

Final Disposition burial

Certified by M. Dunkman
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 09-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
Decedent Charles H Vanezar

Sex M Date of Death Sept 26, 2013

Place of
Death Southborough

Date of
Birth Dec 16, 1921

Immediate
Cause Congestive Heart Failure

Certifier Christian Correa M.D./DO

Permit
Issued To John Matarese

Disposition
At Holy Cross Cem. Malden MA

Name of
Facility Matarese Funeral Home

Date Permit
Issued Sept 27, 2013

No. 09-13

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately to the issuing City/Town, properly endorsed

to Town Clerk

(Office issuing permit)

City/Town of Southborough Mass.

Name of Decedent Charles H Vanezar

If a U.S. War Veteran, specify what war, organization, etc.

..... WWII

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms.

at Holy Cross Cemetery Malden
(Name of cemetery or crematory) City/Town

on Sept. 30, 2013

Final Disposition Buried

Certified by Carl Pender

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 10-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Givan R. JonesSex M Date of Death Oct 23, 2013Place of Death Southborough MaDate of Birth February 7, 1926Immediate Cause Acute Resp ArrestCertifier Aurobindo Chakraborty M.D./DOPermit Issued To Nancy MorrisDisposition At Rural CemeteryName of Facility Morris FuneralDate Permit Issued October 24, 2013No. 10-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately to the issuing City/Town, properly endorsed*to Town Clerk
(Office issuing permit)City/Town of Southborough Mass.Name of Decedent Givan R. Jones

If a U.S. War Veteran, specify what war, organization, etc.

WW II**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)on October 26, 2013Final Disposition Sec. M, Grav#157Certified by S. J. Morris - 157
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 11-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Laura KereekSex F Date of Death Nov. 26 2013Place of Death SouthboroughDate of Birth April 28, 1921Immediate Cause CVACertifier Ruth Shudy M.D./DOPermit Issued To Marcy MorrisDisposition At Rural CemeteryName of Facility Morris Funeral HomeDate Permit Issued Dec 2, 2013No. 11-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately to the issuing City/Town, properly endorsed*to Town Clerk
(Office issuing permit)City/Town of Southborough Mass.Name of Decedent Laura Kereek

If a U.S. War Veteran, specify what war, organization, etc.

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ENDORSEMENT*(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)on December 2, 2013Final Disposition Sec. P. Grv. 16Certified by Ruth Shudy
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 12-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Edward W. Maloney Jr.Sex M Date of Death Dec 10, 2013Place of Death Southborough, MADate of Birth June 29, 1949Immediate Cause Metastatic Carcinoma SkinCertifier John Kri Korian M.D./DOPermit Issued To John P RocheDisposition At Rural CemeteryName of Facility Roche FHDate Permit Issued December 11, 2013No. 12-13**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately to the issuing City/Town, properly endorsed*to Town Clerk
(Office issuing permit)City/Town of Southborough, Mass.Name of Decedent Edward W. Maloney Jr.

If a U.S. War Veteran, specify what war, organization, etc.

=====**ENDORSEMENT***(To be filled in by cemetery or crematory official)*

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City/Town)on December 14, 2013Final Disposition Sec. L, Lawn Crypt #223 BtmCertified by Brian M. Neary
(Signature of Superintendent, Cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.